


CANDIDATE'S REPORT

(to be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate MAYSON FOSTER 800 W. DAKOTA HAMMOND, LA 70401	2. Office Sought (Include title of office as well as parish, city, town and/or election district.) MAYOR CITY OF HAMMOND HAMMOND, TANGIPAHOOA LOUISIANA	OFFICE USE ONLY 10/10 Supp 1/27
3. Date of Primary <u>OCTOBER 2, 2010</u> This report covers from <u>1/1/13</u> through <u>12/31/13</u>		
4. Type of Report: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> 180th day prior to primary <input type="checkbox"/> 90th day prior to primary <input type="checkbox"/> 30th day prior to primary <input type="checkbox"/> 10th day prior to primary <input type="checkbox"/> 10th day prior to general </div> <div> <input type="checkbox"/> 40th day after general <input type="checkbox"/> Annual (future election) <input checked="" type="checkbox"/> Supplemental (past election) <input type="checkbox"/> Amendment to prior report </div> </div>		
5. FINAL REPORT if: <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Filed after the election AND all loans and debts paid <input type="checkbox"/> Unopposed		
6. Name and Address of Financial Institution (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.) WHITNEY BANK HAMMOND, LA 70403	7. Full Name and Address of Treasurer N/A	
9. Name of Person Preparing Report <u>MAYSON FOSTER</u> Daytime Telephone <u>985-345-6339</u>		
10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted. This <u>25th</u> day of <u>JANUARY</u> , <u>2014</u> . <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">  Signature of Candidate/Chairperson (To be signed by Chairperson only if report by principal campaign committee) </div> <div style="width: 45%;"> <u>985-345-6339</u> Daytime Telephone </div> </div>		8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY a. Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary)
Signature of Treasurer _____ Daytime Telephone _____		RECEIVED CAMPAIGN FINANCE JAN 31 AM 10:15

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SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	
2. In-kind Contributions (Schedule A-2)	
3. Campaign paraphernalia sales of \$25 or less	
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 + 3)	
5. Other Receipts (Schedule A-3)	
6. Loans Received (Schedule B)	
7. Loan Repayments Received (Schedule D)	
8. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7)	

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	519.54
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	
12. Funds Loaned (Schedule D)	
13. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12)	519.54

FINANCIAL SUMMARY	Amount
14. Funds on hand at beginning of reporting period (Must equal funds on hand at close from last report or -0- if first report for this election)	519.54
15. <i>Plus</i> total receipts this period (Line 8 above)	-0-
16. <i>Less</i> total disbursements this period (Line 13 above)	519.54
17. <i>Less</i> in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	-0-

SCHEDULE E-1: EXPENDITURES

Use this schedule to report information on all campaign expenditures for this reporting period. An "expenditure" is any payment made for the purpose of supporting your election to public office and includes monies spent for the campaign's general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-2: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are optional. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page.

1. Name and Address of Recipient	2. Expenditures this Reporting Period		
	a. Date(s)	b. Purpose(s)	c. Amount(s)
MACE DONIA MISSIONARY BAPTIST CHURCH HAMMOND, LA 70401	VARIOUS	CONTRIBUTIONS	100 ⁰⁰ -
U. S. POST OFFICE HAMMOND, LA 70404	4/1/13	POSTAGE	86 ⁰⁰ -
U S POST OFFICE HAMMOND, LA 70404	4/16/13	POSTAGE	2 ⁵⁴ -
SECOND SATURDAY BREAKFAST COMMITTEE HAMMOND, LA 70401	1/12/13	CONTRIBUTION	100 ⁰⁰ -
HOLY GHOST CATHOLIC CHURCH HAMMOND, LA 70401	VARIOUS	CONTRIBUTION	100 ⁰⁰ -
SOUTHEASTER LA UNIVERSITY ATHLETIC OFFICE HAMMOND, LA 70402	8/4/13	FOOTBALL TIX	131 ⁰⁰ -
3. SUBTOTAL (optional)			
4. TOTAL (optional - complete only on last page of this schedule)			519.54